

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000113597

**Entity Name:** SHREDADRIVE, LLC

**Current Principal Place of Business:**

9261 SW 202 AVENUE ROAD  
DUNNELLON, FL 34431

**Current Mailing Address:**

9261 SW 202 AVENUE ROAD  
DUNNELLON, FL 34431

**FEI Number:** 46-1334444

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WAGNER, CLAUDE J  
9261 SW 202 AVENUE ROAD  
DUNNELLON, FL 34431 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name WAGNER, CLAUDE J  
Address 9261 SW 202 AVENUE ROAD  
City-State-Zip: DUNNELLON FL 34431

Title MGR  
Name WAGNER, CAROL  
Address 9261 SW 202 AVENUE ROAD  
City-State-Zip: DUNNELLON FL 33431

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CLAUDE J. WAGNER

**MANAGER**

**03/01/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date